

COVER PAGE

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2018 MAR - 10 PM 9:28

Please type or print in ink.

NAME OF FILER (LAST)

(FIRST)

(MIDDLE)

O'Neill

Michael

DEPARTMENT OF CONSERVATION
RESEARCH DATA SUPERVISOR

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

Natural Resources Agency - Department of Conservation

Division, Board, Department, District, if applicable

Your Position

Division of Oil, Gas and Geothermal Resources

Research Data Supervisor 2

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County _____

County of _____

City of _____

Other _____

3. Type of Statement (Check at least one box)

Annual: The period covered is January 1, 2018, through December 31, 2018.

Leaving Office: Date Left _____/_____/_____
(Check one circle.)

-or- The period covered is _____/_____/_____, through December 31, 2018.

The period covered is January 1, 2018, through the date of leaving office.

Assuming Office: Date assumed _____/_____/_____

The period covered is _____/_____/_____, through the date of leaving office.

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 3

Schedules attached

Schedule A-1 - Investments - schedule attached
 Schedule A-2 - Investments - schedule attached
 Schedule B - Real Property - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule D - Income - Gifts - schedule attached
 Schedule E - Income - Gifts - Travel Payments - schedule attached

-or- None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
(Business or Agency Address Recommended - Public Document)

STREET

CITY

STATE

ZIP CODE

801 K Street, MS 18-05

Sacramento

CA

95811

DAYTIME TELEPHONE NUMBER

(916) 322-9264

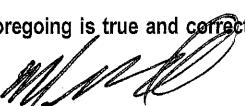
EMAIL ADDRESS

michael.oneill@conservation.ca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3-4-2019
(month, day, year)

Signature 

(File the originally signed paper statement with your filing official.)

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized.

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

O'Neill, Michael L.

► NAME OF BUSINESS ENTITY

Apple Inc.

GENERAL DESCRIPTION OF THIS BUSINESS

Computers

FAIR MARKET VALUE

\$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/18 ____/____/18
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Salesforce

GENERAL DESCRIPTION OF THIS BUSINESS

Software

FAIR MARKET VALUE

\$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/18 ____/____/18
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Kroger

GENERAL DESCRIPTION OF THIS BUSINESS

Food Groceries

FAIR MARKET VALUE

\$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/18 ____/____/18
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Amazon

GENERAL DESCRIPTION OF THIS BUSINESS

Retail

FAIR MARKET VALUE

\$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/18 ____/____/18
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Ford Motor Company

GENERAL DESCRIPTION OF THIS BUSINESS

Automotive Manufacturer

FAIR MARKET VALUE

\$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/18 ____/____/18
 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

\$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____/____/18 ____/____/18
 ACQUIRED DISPOSED

Comments: Disposed of prior year's holdings in Honeywell, AT&T, Home Depot.

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

O'Neill, Michael L.

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

ICF International

ADDRESS (Business Address Acceptable)

630 K Street, Suite 400, Sacramento, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Consultant

YOUR BUSINESS POSITION

Project Assistant

GROSS INCOME RECEIVED No Income - Business Position Only

\$500 - \$1,000 \$1,001 - \$10,000
 \$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)
 Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)

Sale of _____
(Real property, car, boat, etc.)

Loan repayment

Commission or Rental Income, list each source of \$10,000 or more

(Describe)

Other _____
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

INTEREST RATE

TERM (Months/Years)

_____ % None

ADDRESS (Business Address Acceptable)

SECURITY FOR LOAN

BUSINESS ACTIVITY, IF ANY, OF LENDER

None Personal residence

HIGHEST BALANCE DURING REPORTING PERIOD

Real Property _____
Street address

\$500 - \$1,000

_____ City

\$1,001 - \$10,000

Guarantor _____

\$10,001 - \$100,000

Other _____
(Describe)

OVER \$100,000

Comments: _____